

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted With Initial Filing      **OR**      ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	0110-053
First Named Inventor	Peter Jacobsson
<i>COMPLETE IF KNOWN</i>	
Application Number	
Filing Date	07/11/2005
Art Unit	
Examiner Name	

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Device and Method for Predistorting an Input Signal**

*(Title of the Invention)*

the specification of which

☐ is attached hereto

**OR**

☒ was filed on (MM/DD/YYYY) **11/03/2003** as United States Application Number or PCT International

Application Number **PCT/EP03/011938** and was amended on (MM/DD/YYYY) **03/10/2005** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
03000495-6	EPO	01/13/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

*If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.*

**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input checked="" type="checkbox"/> The address associated with Customer Number:		42015		OR <input type="checkbox"/> Correspondence address below	
Name <b>Potomac Patent Group PLLC</b>					
Address <b>P.O. Box 270</b>					
City <b>Fredericksburg</b>		State <b>Virginia</b>		ZIP <b>22404</b>	
Country <b>US</b>		Telephone <b>1 919 677 9591</b>		Email	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <b>Peter</b>			Family Name or Surname <b>Jacobsson</b>		
Inventor's Signature					Date
Residence: City <b>Lund</b>		State		Country <b>Sweden</b>	
				Citizenship <b>Sweden</b>	
Mailing Address <b>Uardavägen 6 D</b>					
City <b>SE-224 71 Lund</b>		State		Country <b>Sweden</b>	
				Zip	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <b>Per</b>			Family Name or Surname <b>Nordqvist</b>		
Inventor's Signature					Date
Residence: City <b>Lund</b>		State		Country <b>Sweden</b>	
				Citizenship <b>Sweden</b>	
Mailing Address <b>Flormansgatan 4 B</b>					
City <b>SE-223 54 Lund</b>		State		Country <b>Sweden</b>	
				Zip	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

**DECLARATION****ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 1

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Björn		Gustavsson	
Inventor's Signature		Date	
Lund	State	Sweden	Sweden
Residence: City		Country	Citizenship
Bankgatan 14 C			
Mailing Address			
SE-223 52 Lund	State	Zip	Sweden
City			Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
	State	Country	Citizenship
Residence: City			
Mailing Address			
	State	Zip	Country
City			
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
	State	Country	Citizenship
Residence: City			
Mailing Address			
	State	Zip	Country
City			

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